



UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS
UNITED STATES PATENT AND TRADEMARK OFFICE
WASHINGTON, D.C. 20231
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Bib Data Sheet

CONFIRMATION NO. 1797

SERIAL NUMBER 09/759,016	FILING DATE 01/12/2001 RULE	CLASS 705	GROUP ART UNIT 3629	ATTORNEY DOCKET NO. FIS9-2000-0282
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APPLICANTS

Russell E. Parks, Marlboro, NY;

Frank Davide, Monroe, NY;

Allison M. McCormack, Hopewell Junction, NY; Jae K. Park, Ryebrook, NY;

** CONTINUING DATA *****

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 02/28/2001

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY NY	SHEETS DRAWING 2	TOTAL CLAIMS 7	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Notified and Acknowledged Examiner's Signature _____ Initials _____				

ADDRESS

30743

WHITHAM, CURTIS & CHRISTOFFERSON, P.C.

11491 SUNSET HILLS ROAD

SUITE 340

RESTON, VA

20190

TITLE

Skills matching application

FILING FEE RECEIVED 710	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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CONFIRMATION NO. 1797

SERIAL NUMBER 09/759,016	FILING DATE 01/12/2001 RULE	CLASS 705	GROUP ART UNIT 2161	ATTORNEY DOCKET NO. FIS9-2000-0282
APPLICANTS Russell E. Parks, Marlboro, NY; Frank Davide, Monroe, NY; Allison M. McCormack, Hopewell Junction, NY; Jae K. Park, Ryebrook, NY;				
** CONTINUING DATA *****				
** FOREIGN APPLICATIONS *****				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 02/28/2001				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged _____ Examiner's Signature _____ Initials _____		STATE OR COUNTRY NY	SHEETS DRAWING 2	TOTAL CLAIMS 7
				INDEPENDENT CLAIMS 3
ADDRESS <i>Customer Number 30743</i> C. Lamont Whitham, Esq. McGuire Woods LLP 1750 Tyons Boulevard - Suite 1800 Mclean, VA 22102				
TITLE Skills matching application				
FILING FEE RECEIVED 710	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	